## **WHITCOM**

E-911 Emergency Communications EMPLOYMENT APPLICATION 325 S.E. PARADISE STREET PULLMAN, WA 99163 (509) 338-3207

WHITCOM IS AN EQUAL OPPORTUNITY "AT-WILL" EMPLOYER. IF YOU NEED ASSISTANCE IN COMPLETING THIS APPLICATION, PLEASE CONTACT THE HUMAN RESOURCES DEPARTMENT AT (509) 338-3207. T.D.D. 1-800-833-6388.

An incomplete application may delay action or disqualify you. Please type or use a ballpoint pen in completing this application.

POSITION APPLIED FOR:			DATE:		
NAME:					
Last	First		Middle		
PRESENT ADDRESS:		CITY:	ST	ZIP	
PERMANENT ADDRESS:		CITY:	ST	ZIP	
PHONE: (HOME) ( ) (BUSINE	SS) ( )	(MSG) (	)		
PREVIOUS WHITCOM EMPLOYEE?YES1	NO DATES:	FROM	TO		-
POSITION HELD:				-	
ARE YOU RELATED BY BLOOD, ADOPTION, OR MA				YES	NO
ARE YOU OVER THE AGE OF 18?YESNO					
ARE YOU PREVENTED FROM LAWFULLY BECOMI STATUS? YES NO Proof of citizen:				OR IMMIGE	RATION
HAVE YOU BEEN CONVICTED FOR THE VIOLATIO WITHIN THE LAST TEN YEARS?	ON OF ANY LAW	(EXCEPT MINOR T	RAFFIC VIOLATIONS	S OF \$75 OF	R LESS)
YES NO IF YES, LIST THE CITY WHERE ISS	SUED, THE CHAF	GE, DATE OF ISSUI	E, AND DISPOSITION	:	
CONVICTION DOES NOT NECESSARILY BAR YOU	U FROM EMPLO	OYMENT WITH WH	ПТСОМ.		
U.S. MILITARY SERVICE:YES NO SPECI.	ALITY:				
BRANCH OF SERVICE: D	ATE IN:	DA	TE OUT:		
MANAGEMENT/SUPERVISORY EXPERIENCE?Y	YESNO NUN	IBER OF YEARS:			
Number of Employees Managed/Supervised: Desc	cribe your primary	management/superviso	ory functions:		
PROFESSIONAL CERTIFICATIONS: (Please list any pro-	ofessional certifica	tions and their expirat	on dates.		
Certification		<del></del> :	Expiration Date		

## **EDUCATION**

0.1. 1	N 1411 (C) 1	G	V C 1 1 1	D' 1 /D		
School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree		
High School						
Undergraduate						
Graduate						
Other						
WORK HISTORY						

RESUMES MAY BE ATTACHED BUT WILL NOT BE A BEGINNING WITH YOUR PRESENT OR MOST RECEN THE LAST TEN YEARS, INCLUDING PERIODS OF SEL	T EMPLO F-EMPLO	OYMENT OYMENT	, LIST YOUR WORK	EXPERIENCE	FOR AT LEAS
SHEETS IF NECESSARY. IF AN ANSWER IS NOT KNO Employer:	Dates Er		Work Performed		
Address:	From	То			
Telephone:					
Job Title:	Hrly Rat	e/Salary			
Supervisor:	Start	Final	Full-time	Part-tim	e
Reason for Leaving:			May we Contact: _	Yes	_ No
Employer:	Dates Er	nployed	Work Performed		
Address:	From	То			
Telephone:					
Job Title:	Hrly Rat	e/Salary			
Supervisor:	Start	Final	Full-time	Part-tim	e
Reason for Leaving:			May we Contact: _	Yes	_ No
Employer:	Dates Er	nployed	Work Performed		
Address:	From	То			
Telephone:					
Job Title:	Hrly Rat	e/Salary			
Supervisor:	Start	Final	Full-time	Part-tim	e
Reason for Leaving:			May we Contact:	Yes	_ No

Reason for Leaving:  mployer: ddress: elephone: ob Title: upervisor:	From  Hrly Rate  Start  Dates En  From  Hrly Rate	To  te/Salary  Final  pployed  To	Full-time Par  May we Contact: Yes  Work Performe	No
ob Title:  upervisor:  eason for Leaving:  uployer:  dress:  lephone:  b Title:  pervisor:	Start  Dates En  From	Final	May we Contact:Yes	No
Supervisor:  Reason for Leaving:  mployer: ddress: elephone: bb Title: upervisor:	Start  Dates En  From	Final	May we Contact:Yes	No
mployer: ddress: elephone: ob Title: upervisor:	Dates En	nployed	May we Contact:Yes	No
address: Celephone: Cob Title: Cupervisor:	From			
Employer: Address: Celephone: Ob Title: Supervisor: Reason for Leaving:	From		Work Performe	ed
address: Celephone: ob Title: upervisor:	From			
ob Title: Supervisor:	Hrly Rate			
upervisor:	Hrly Rate		İ	
•		e/Salary		
Reason for Leaving:	Start	Final	Full-time Part	-time
			May we Contact: Yes	No
EASE PROVIDE NAMES OF ADDITIONAL REFE OVIDE INFORMATION CONCERNING YOUR C NAME:	CHARACTER A	AND QUA	ALIFICATIONS RELATIVE TO	THE POSITI
COMPLETE ADDRESS:				
RELATIONSHIP TO YOU:				
RELATIONSHIP TO YOU:NAME:				
			PHONE:	
NAME:			PHONE:	
NAME:COMPLETE ADDRESS:			PHONE:	
NAME:COMPLETE ADDRESS:RELATIONSHIP TO YOU:			PHONE:PHONE:	
NAME:  COMPLETE ADDRESS:  RELATIONSHIP TO YOU:  NAME:			PHONE:PHONE:	

SKILLS				
TYPING OR COMPUTER KEYBOARDING EXPERIENCE? YES NO w.p.m				
COMPUTER EXPERIENCE?YES NO IBM COMPATIBLE?YES NO				
List the software programs you have worked with:  Word processing:				
Spreadsheet:				
Database: Internet:				
IF THE POSITION APPLIED FOR REQUIRES A DRIVER'S LICENSE, DO YOU HAVE A VALID LICENSE? YES NO State of Issue: Driver's License Number: Expiration Date:				
LIST ANY ADDITIONAL MACHINES, TOOLS, OR EQUIPMENT WHICH YOU OPERATE RELEVANT TO THE POSITION:				
CERTIFICATION  I CERTIFY UNDER PENALTY OF PERJURY THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION (AND ATTACE MENTS, IF ANY) ARE TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSE STATEMENTS MAY B SUFFICIENT REASON FOR DISMISSAL IF I AM HIRED BY WHITCOM. ALL STATEMENTS SUBMITTED ON THI APPLICATION FOR EMPLOYMENT MAY BE INVESTIGATED AND VERIFIED BY WHITCOM AND/OR ITS AGENTS PRIOR TO APPOINTMENT OR NON-APPOINTMENT.				
SIGNATURE DATE				

EMPLOYMENT IS CONTINGENT UPON THE SUCCESSFUL COMPLETION OF AN EMPLOYMENT ELIGIBILITY VERIFICATION FORM (I-9) [P.L. 99-603: U.S. IMMIGRATION REFORM AND CONTROL ACT OF 1986]; AND, WHEN APPLICABLE, AN APPLICANT DISCLOSURE FORM (PURSUANT TO CHAPTER 486, LAWS OF 1987 AS AMENDED) AND WASHINGTON STATE PATROL CRIMINAL HISTORY BACKGROUND CHECK (R.C.W. 43.43.830-840).

WHITCOM IS AN EQUAL OPPORTUNITY EMPLOYER AND ASSURES EQUAL EMPLOYMENT REGARDLESS OF RACE, CREED, COLOR, ETHNICITY, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, OR THE PRESENCE OF ANY SENSORY, MENTAL, OR PHYSICAL DISABILITY.